



RCE/3679 \$ 61

Attorney Docket No.: PEG-2001CP1

CERTIFICATE OF TRANSMISSION BY "FIRST CLASS MAIL"

I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office, addressed to Office of Petitions, and to the attention of: Commissioner for Patents, Alexandria, VA 22313 on July 7, 2004.

Harry Macey

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Inventor(s): Proctor, et al.
Serial No.: 09/753,122
Filing Date: December 29, 2000
Title: DUCT JOINING SYSTEM

Art Unit: 3679
Examiner: A. Dunwoody

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JUL 20 2004

GROUP 3600

REQUEST FOR CONTINUED EXAMINATION (RCE) & FEE TRANSMITTAL
(for nonprovisional applications under 37 CFR § 1.114)

MAIL STOP RCE
Commissioner for Patents
Alexandria, VA 22313

Sir:

Transmitted herewith for filing in connection with the above-identified patent application are the following:

1. SUBMISSION REQUIRED UNDER 37 C.F.R. § 1.114

- a. ☐ Previously submitted
- i. ☐ Consider the amendment(s)/reply under 37 C.F.R. § 1.116 previously filed on _____.
(Any unentered amendment(s) referred to above will be entered).
- ii. ☐ Consider the arguments in the Appeal Brief or Reply Brief previously filed on _____.
- iii. ☐ Other _____.
- b. ☒ Enclosed
- i. ☒ Amendment/Reply
- ii. ☐ Affidavit(s)/Declaration(s)
- iii. ☐ Information Disclosure Statement (IDS) (* pgs) with 1449 (* pg) and all listed documents
- iv. ☐ Other:

2. MISCELLANEOUS

- a. ☐ Suspension of action on the above-identified application is requested under 37 C.F.R. § 1.103(c) for a period of ____ months. (Period of suspension shall not exceed 3 months; Fee under 37 C.F.R. § 1.17(i) required)
- b. ☐ Other _____.

3. FEES

- a. ☐ The Director is hereby authorized to charge the following fees, and any additional fees required to process this request to Deposit Account No. 50-1947 referencing Attorney Docket No. *. Copy of request enclosed.
- i. ☒ RCE fee required under 37 C.F.R. § 1.17(e). [\$770.00/\$385.00] \$ 385.00
- ii. ☒ Extension of time fee (37C.F.R. §§ 1.136 and 1.17) [3 months] \$ 475.00
- iii. ☒ Other: Additional claims fee \$ 86.00

TOTAL FEES \$ 946.00

- b. ☒ Check in the amount of \$ 946.00 is enclosed.
- c. ☐ Payment by credit card (Form PTO-2038 enclosed).

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Harry Macey
SIGNATURE

7/7/04
DATE

Harry J. Macey

32,818

NAME

REGISTRATION NUMBER